DENTAL Insured Preferred Provider Plan Service Area

| DENTAL | Product | Form | CARRIERS' SERVICE AREA BY COUNTY | | | | | | | | | | | | |
|---|--|------------------------------|----------------------------------|------|------|-----|------|-------|------|-------|------|------|------|------|------|
| Insured Preferred Provider Plans | Name | Number | Barn | Berk | Bris | Duk | Ess | Frank | Hmpd | Hmpsh | Midd | Nant | Norf | Plym | Suff |
| 1 Aetna Life Insurance Company | Advantage Plus | MA-DMO | | | All | | All | | All | | All | | All | All | All |
| 2 Aetna Life Insurance Company | Dental PPO | MA-Dental PPO | All | All | All | | All | | All | All | All | | All | | All |
| 3 Altus Dental Insurance Company, Inc. | Altus Dental Preferred | AD 1 v.3; AD 1 v.4 | All | All | All | | All | All | All | All | All | | All | All | All |
| 4 Altus Dental Insurance Company, Inc. | Altus Dental Preferred - AAA Members | AD 3A-01 | All | All | All | | All | All | All | All | All | | All | All | All |
| 5 Altus Dental Insurance Company, Inc. | Altus Dental Preferred - AAA Members | AD 3B-01 | All | All | All | | All | All | All | All | All | | All | All | All |
| 6 Ameritas Life Insurance Corporation | Ameritas Managed Plan | GR9021 et al. | Part | Part | Part | | All | | Part | | All | | All | All | All |
| 7 Blue Cross and Blue Shield of Massachusetts, Inc. | Dental Blue PPO1 | DENT PPO1 | All | All | All | All | All | All | All | All | All | All | All | All | All |
| 8 Blue Cross and Blue Shield of Massachusetts, Inc. | Dental Blue PPO2 | DENT PPO2 | All | All | All | All | All | All | All | All | All | All | All | All | All |
| 9 Connecticut General Life Insurance Company | CIGNA Dental PPO | GM6000 C2 (Dental) | | | All | | All | | All | | All | | All | All | All |
| 10 Dental Service of Massachusetts, Inc. | Delta Preferred | DDP-PPA1 | Part | | | | Part | | Part | | Part | | | Part | All |
| 11 Dental Service of Massachusetts, Inc. | | DDP-PPA2 | All | All | All | All | All | All | All | All | All | All | All | All | All |
| 12 Fortis Benefits Insurance Company | | DENTAL 94 et al. | | | All | | All | | All | | All | | All | All | All |
| 13 GE Group Life Assurance Company | Phoenix Preferred Dental | GC-A-1 et al. | | | Part | | Part | | | | All | | All | All | All |
| · (·) · · · · · · · · · · · · · · · · | DentalGuard Preferred | CGP-3-DNTL-90-1 et al. | All | All | All | | All | All | All | All | All | | All | All | All |
| 14 Metropolitan Life Insurance Company | MetLife Preferred Dentist Program - Clas | G.23000-13E-MA1 | All | All | All | | All | All | All | All | All | | All | All | All |
| 15 Metropolitan Life Insurance Company | MetLife Preferred Dentist Program - Valu | G.23000-13E-MA2 | All | All | All | | All | All | All | All | All | | All | All | All |
| 16 Mutual of Omaha Insurance Company | Mutually Preferred Dental | 7000CI-M-EZ et al. | All | | All | | All | | | | All | | All | All | All |
| 17 Principal Life Insurance Company | Dental PPO - Classic & Premier Design | GC 700 (PPO)-1/GH 100 A (DPP | All | All | All | | All | All | All | All | All | | All | All | All |
| 18 Principal Life Insurance Company | Group Voluntary Dental Expense PPO P | GH 100 A (DPPO) et al. | All | All | All | | All | All | All | All | All | | All | All | All |
| 19 Reliance Standard Life Insurance Company | Ameritas Managed Dental Plan | REL9021 ed. 1-92 | Part | Part | Part | | All | | Part | | All | | All | All | All |
| 20 ReliStar Life Insurance Company | Group Dental Preferred Provider Plan | DOOMAP | All | All | All | | All | All | All | All | All | | All | All | All |
| 21 Standard Insurance Company | Group Dental & Eye Care Certificate | SI 9021 Ed. 01-02 | All | All | All | | All | All | All | All | All | | All | All | All |
| 22 UniCARE Life and Health Insurance Company | Wellpoint Dental PPO | GCR 130, 31119-31127 | Part | | Part | | Part | | | | All | | All | All | All |
| 23 United HealthCare Insurance Company | Dental Certificate of Coverage | DCE | All | | All | | All | All | All | All | All | | All | All | All |
| 24 United of Omaha Life Insurance Company | Mutually Preferred Dental | 7000CI-U-EZ et al. | All | | All | | All | | | | All | | All | All | All |

Page 7 As of September 21, 2004

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Page 8 As of September 21, 2004